

IFW #

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of:

Attorney Docket No.: 49592.71.1
(previously Attorney Docket No. 10739.14.192)

Johnson, et al.

Application No.: 10/619,054

Examiner: Barfield, Anthony Derrell

Filed: July 14, 2003

Group Art Unit: 3636

For: ADJUSTABLE STORAGE SEAT FOR RECREATION AND UTILITY VEHICLES

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

In response to the Office Action mailed November 15, 2004, please amend the above-identified application as set forth below.

Amendments to the Claims begin on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.

FORM PTO-1083
Docket No. 49592.71.1
In re application of: Johnson, et al.

Serial No. 10/619,054

Filed: July 14, 2003

For: Adjustable Storage Seat for Recreation and Utility Vehicles

COMMISSIONER FOR PATENTS
ALEXANDRIA, VA 22313-1450

Sir: Transmitted herewith is an amendment in the above-identified application.

☐ Applicant claims small entity status.

☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

☒ No additional fee is required. The fee has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY				
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	20	MINUS	** 20	= 0	\$ 25	\$0		\$ 50	\$0
INDEP.	2	MINUS	*** 4	= 0	\$100	\$0		\$200	\$0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						\$ 0			\$
					TOTAL	\$0	OR	TOTAL	\$0
					ADDIT. FEE				

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

☐ Please charge by Deposit Account No. 061910 in the amount of \$0 A duplicate copy of this sheet is attached.

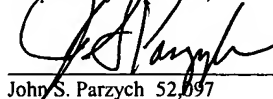
☐ A check in the amount of \$0 is attached.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 061910. A duplicate copy of this sheet is attached.

☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,


John S. Parzych 52,097